KENTUCKY OFFICE OF EMPLOYMENT AND TRAINING PREVAILING WAGE INFORMATION REQUEST

FAX TO: (502) 564-7459

1. Name of Employer (Full Name of Organization)			2. Telephone (Area Code and Number)		
3. Address (Number, Street, City or Town, State, ZIP Code)			County		
4. Name of Alien (if known)					
5. Address where Alien will work (if o	lifferent from item 3)				
6. Nature of Employer's Business	7. Alien's Job Title 8. Work Shift		Shift	9. Rate of Pay (\$/hr)	
10. Describe fully the job to be performed as the performance of the p	ned (duties and special requ	nirements)			□H1B □H2B □Traditional (PERM)
11. Which level best describes this occupation? SKILL LEVEL I – Entry level, little to no experience required SKILL LEVEL II – Some experience and/or education required		(Check appropriate Box) SKILL LEVEL III – High level of experience and education required SKILL LEVEL IV – Fully competent, extensive experience required			
12. College Education (number of years) College Degree required (specify) Specify Specialty		14. Number of Employees Alien will supervise			
13. Experience requiredyearsmonths		15. Occupational Title of person who will be Alien's immediate supervisor			
Submit typed form to: Office of Employment and Training Alien Labor Certification Unit Division for Field Services 275 East Main Street, 2WA Frankfort, Kentucky 40621 ***FOR OFFICIA		Phone Number _ Fax Number _			_
The prevailing wage for the job described above is \$ perWL:					
OES Code: S By:					
****THIS RATE IS VALID FOR FILING APPLICATIONS AND ATTESTATIONS**** Rev.12/15/06					

PLEASE DO NOT SUBMIT DUPLICATE REQUESTS. ALLOW 14 WORKING DAYS FOR PROCESSING.

